

# *National Health Service Corps Teams Filling Health Manpower Void*

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Before Dr. Joe Viglotti, a National Health Service Corps assignee, arrived to be the general practitioner in Jackman, Maine, a sign on the highway read, "Drive Carefully: There's No Doctor in Town."

In Health Area 34 of the South Bronx, N.Y., Dr. Robert Meringola and Dr. Arthur DeAngelis,

on the job only since early spring of this year, are providing primary care to adults who have never before received it.

Jackman and the area of the South Bronx give some idea of the variety of rural and urban communities being served by the first contingents of the National Health Service Corps.

National Health Service Corps teams are also on assignment in such diverse locations as the migrant worker community of Immokalee, Fla., the isolated delta region of southern Sacramento County, Calif., and in Appalachia.

Created by passage of the Emergency Health Personnel Act of 1970 to Assign Medical and other Health Personnel to Critical Need Areas, the National Health Service Corps announced the first 20 communities to be assigned personnel early this year. The Corps is part of the Health Services and Mental Health Administration.

An additional 122 communities were designated as areas of critical health need in May and were assigned National Health Service Corps personnel in July. More than 5,000 communities are without health services, according to Dr. H. McDonald Rimple, Director of the program.

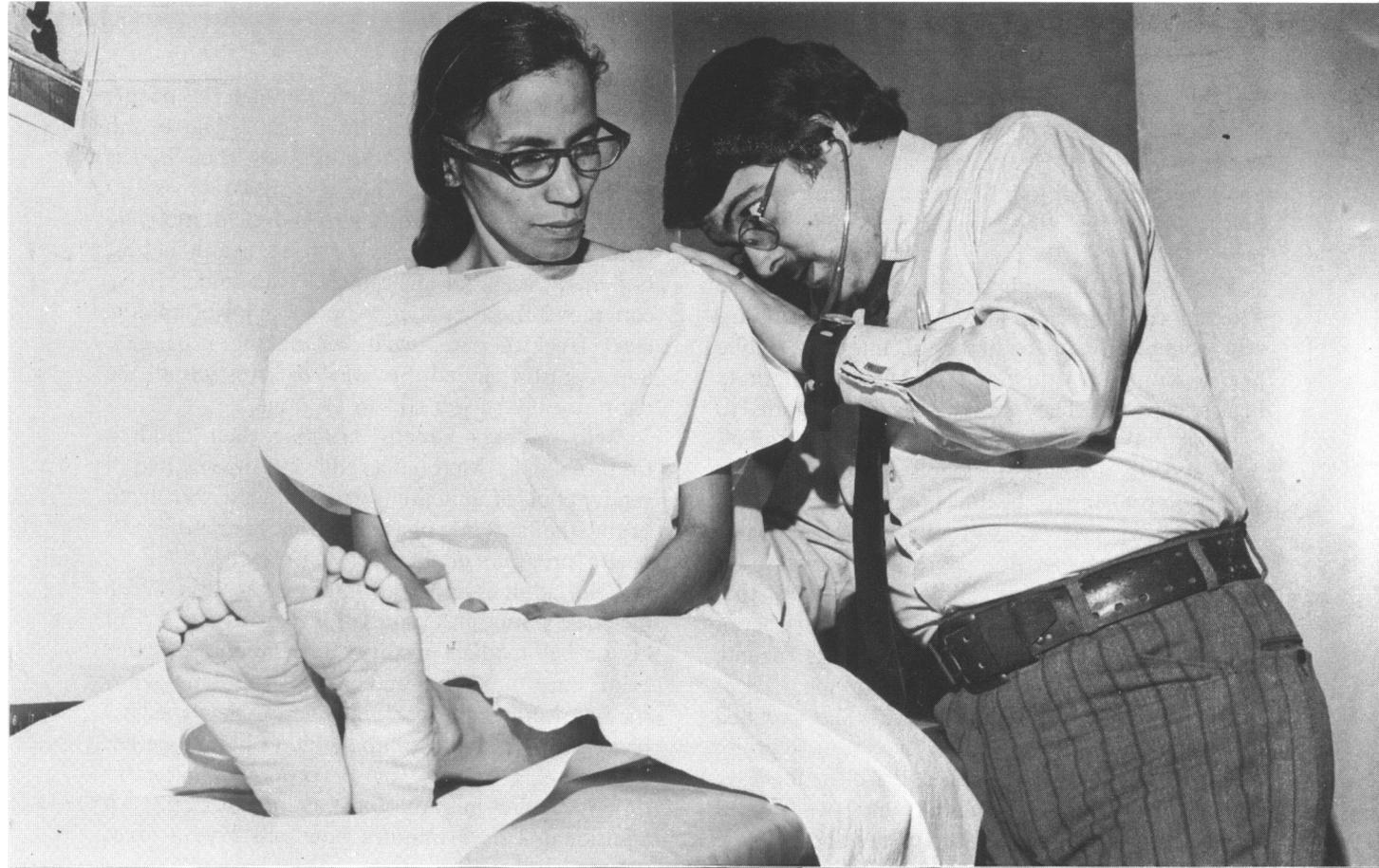
## South Bronx

More than 11,000 people are crammed into tenement dwellings in the 24-block area of the South Bronx served by National Health Service Corps assignees. Juvenile delinquency and drug addiction rates there are among the highest in the city. Crisis medical care is part of its pattern, and overcrowded hospital emergency rooms are an inadequate substitute for the family physician. Consequently, serious ailments are treated with aspirin and resignation.

Before the arrival of Meringola and DeAngelis, health services ended at age 18. The physicians are assigned to the Montefiore-Morrisania Comprehensive Child Care Project, which has expanded its services to include all family members. Five and one-half years ago, when the project

*National Health Service Corps physicians, Robert Meringola (below) and Arthur DeAngelis (right) assigned to the Montefiore-Morrisania Comprehensive Child Care Project in the South Bronx, are providing primary care to adults who have never before received it; (lower right) Meringola confers with his patient, her son, and public health nurse, Emma DeSisto*





first opened, the community was totally unserved. Extraction clinics still provide the sole dental care. A National Health Service Corps dentist and two nurses will join Meringola and DeAngelis in expanding the range of services to meet this need.

The two NHSC physicians have joined the Montefiore-Morrisania health teams, which are now composed of a pediatrician, internist, public health nurse, a nurse's aide, and community health workers. They work with family units to gain an understanding of the total family situation and to educate residents in the concept of a comprehensive health program.

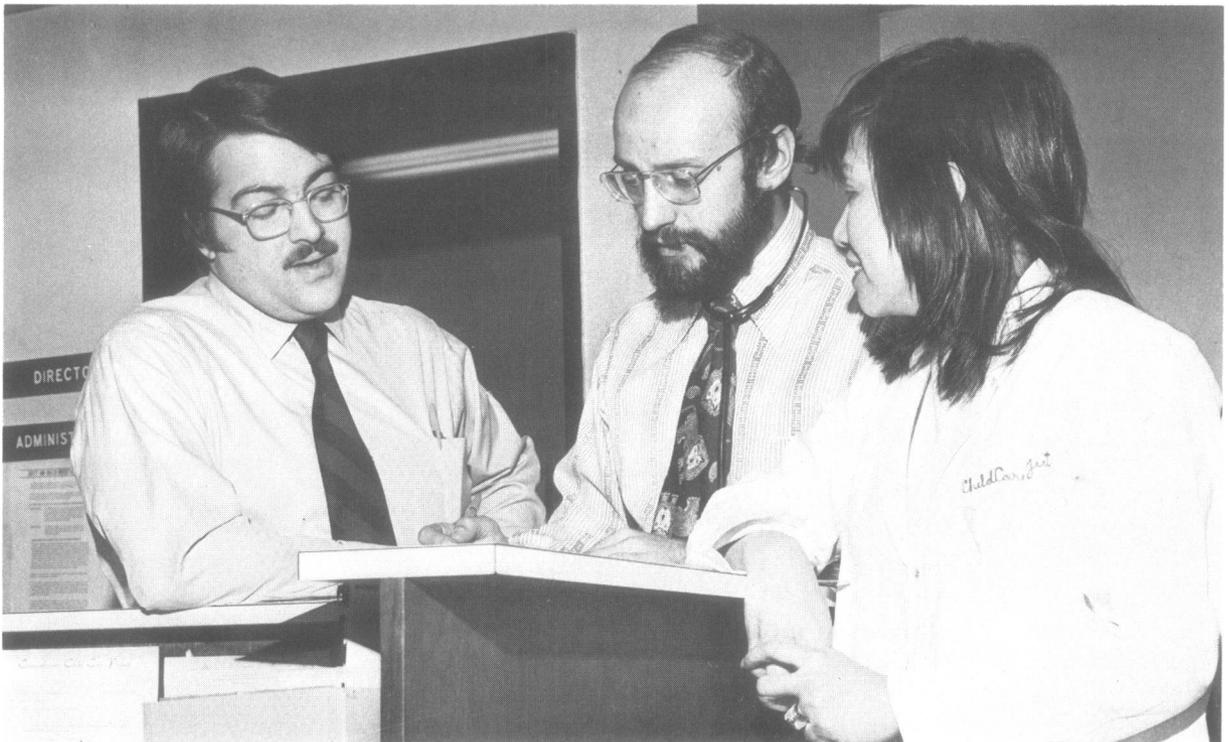
Dr. Mutya San Agustin, the attractive, energetic director of the Montefiore-Morrisania Comprehensive Child Care Project, observed that "health has a very low priority in the ghetto, coming after the problems of housing, income maintenance, job training and employment, education and juvenile delinquency." She recalled that when they first opened, "we were a group of eager young professionals, and we sat for days waiting for patients. It wasn't until we started using health workers, themselves members of the

community, that we were able to reach the people and gain their confidence and trust. The health workers meet residents informally in their homes or in the laundromat. They can make an assessment of the family situation and help motivate family members not only to good health habits, but in all areas of their lives," she said. "If we can move these residents up to a lower middle class level of care, we'll be making progress," San Agustin added by way of illustrating the enormity of the job still to be done.

With mothers already bringing their children to the clinic, Meringola and DeAngelis had a ready pool of potential patients with whom to begin the second phase of the comprehensive health program in this NHSC project.

Each adult is given an initial evaluation which includes a routine examination and discussion of his or her medical history. Since records of any prior care are scattered about the emergency rooms of municipal hospitals, a complete medical history is often almost impossible to piece together and a high degree of perception and extra time is needed in garnering this information. "An additional 2 or 3 minutes now will save a great

*Montefiore-Morrisania Comprehensive Child Care Project director, Mutya San Agustin, M.D. (right) talks with National Health Service Corps internists DeAngelis and Meringola. Assignment of the two internists has expanded services to include adults.*





*Health teams meet regularly to assess total family situation of community residents. From left, public health nurse, medical student, community health worker, nurse's aide, community health worker, internist, and pediatrician discuss patients assigned to their team.*

deal of time later on," commented DeAngelis, a 29-year-old native New Yorker who became aware of the needs in this section of the Bronx while a resident at the Morrisania City Hospital.

The National Health Service Corps physicians are, in effect, bringing the services of a family physician to Health Area 34, where residents are unaccustomed to being treated on a one-to-one basis or to anyone's really caring about them. When the clinic first opened, 70 percent of the appointments were not kept. If an appointment is missed, somebody from the clinic follows up with a telephone call or a personal visit. Very few appointments are not met today.

When a resident needs hospital care, the National Health Service Corps practitioner acts as the patient's personal physician, making daily visits and following the patient closely. This procedure is standard whether the person is hospitalized for treatment or as a result of an accident or some other emergency.

"In this community where personal concerns are afforded a very low order of priority, people are being offered the simple commodity of human dignity for the first time in their lives and being made to feel that someone cares," says Meringola.

Meringola, 28, requested a transfer to this project from the Public Health Service Clinic in

Washington, D.C. A New Yorker, he served his internship at the Metropolitan Hospital Center, where he became aware of the health problems in the inner city. "I wanted to be able to do something about them," he says simply.

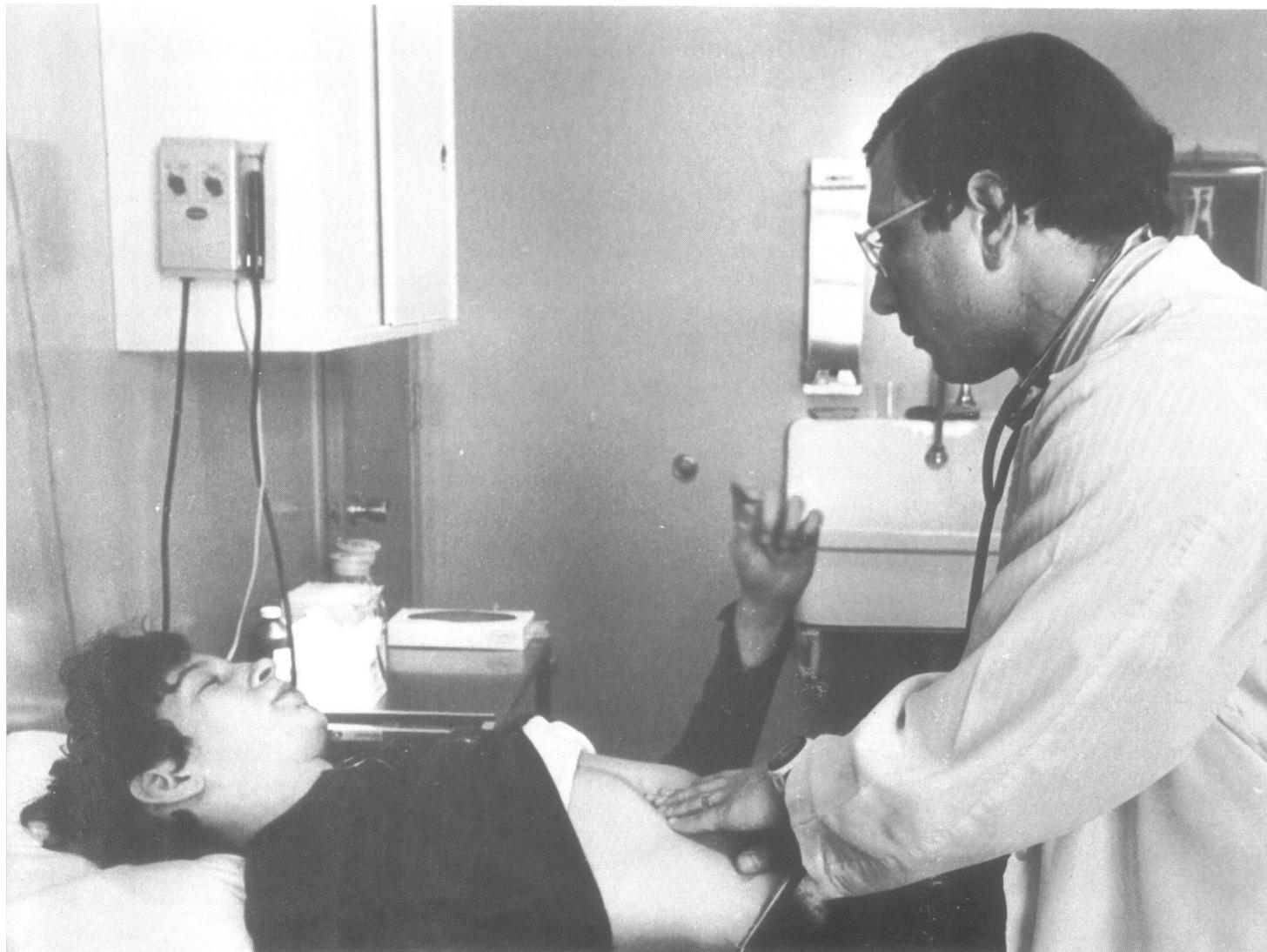
The project's clinic at 230 E. 162d Street, a recently refurbished warehouse, is a cheerful complex of activity. The population is 53 percent Puerto Rican, 45 percent black, and 2 percent white. Signs on the walls are written in Spanish and English. Restrooms are marked "Damas" and "Caballeros." Bright doors, painted in four different colors, identify the health teams to which each family is assigned. Meringola and DeAngelis are each assigned to two teams.

A fully equipped dental clinic is ready for the next NHSC assignee. "Teeth look like the potholes in the streets," sighs San Agustin.

A day for Meringola and DeAngelis will typically include at least one initial evaluation which takes a good hour and a half, hospital visits, regularly scheduled appointments, and a few walk-in patients. That these physicians have quickly gained the trust of the inhabitants is evidenced by the fact that recovered patients sometimes drop by to visit. While they work individually, they will each ask the other to make independent evaluations of their patients. Together



*Main Street in Jackman, Maine. This isolated community applied to the National Health Service Corps for a physician after its efforts to recruit a physician failed. Joseph Viglotti was assigned to care for the 3,000 inhabitants of the area.*



*Joseph Viglotti  
and Monique Viglotti,  
National Health Service Corps  
assignees, leave  
the Marie Joseph Hospital  
in Jackman.  
A recovering patient  
signs out  
for the afternoon.*

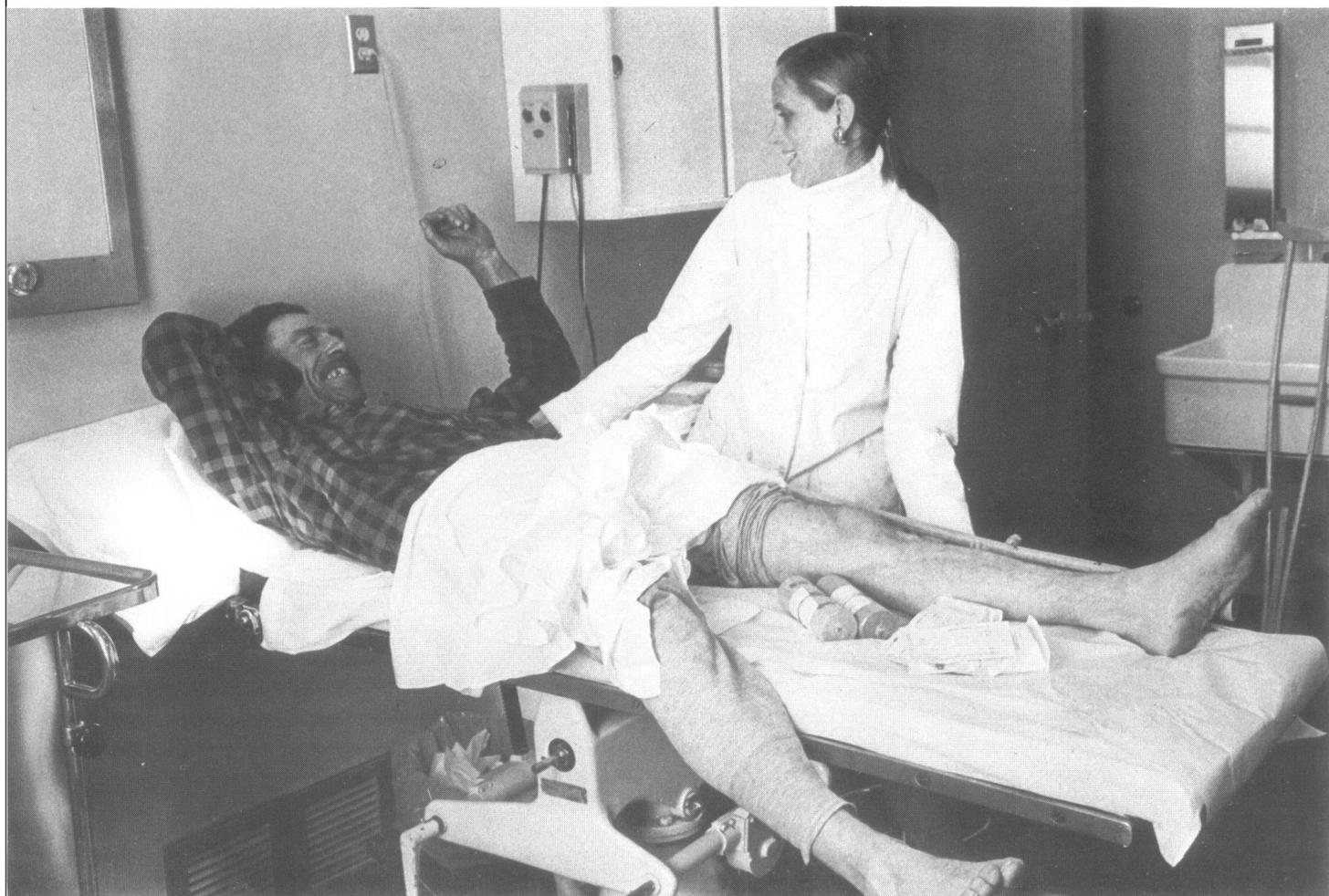


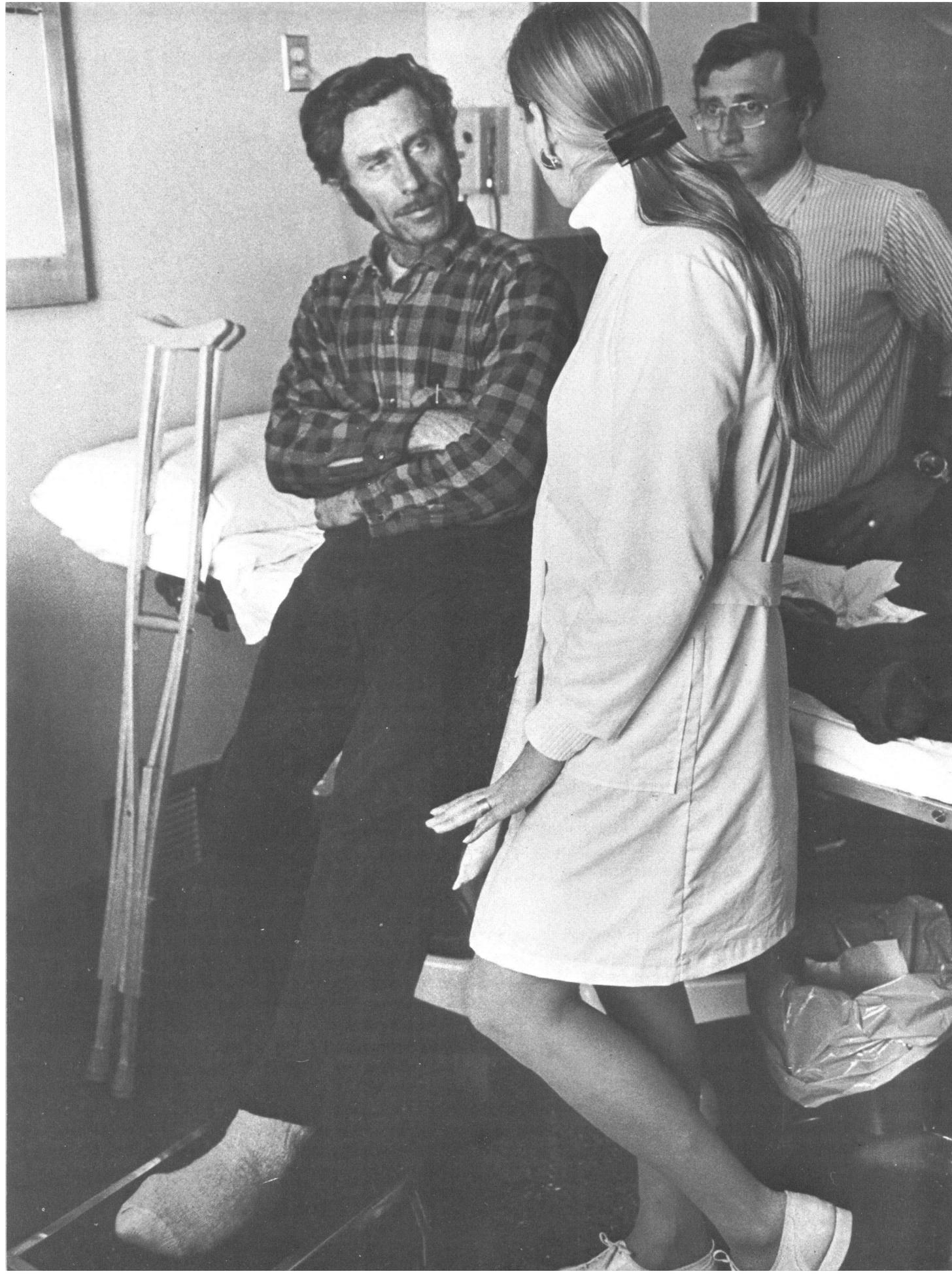


*An emergency provides the Viglotti's with an opportunity to practice their well-coordinated teamwork. A lumberjack, injured by a falling tree, is tended by the couple in the Marie Joseph Hospital emergency room.*

*The patient describes his injuries to Monique Viglotti in French and she relays the information to her husband in English.*

*After the extent of the man's injuries are determined by examination and X-rays, he is measured for crutches and given a program for recuperation.*







*The mother of a young patient describes her son's symptoms to Viglotti as Mrs. Viglotti makes notes*

they are seeing up to 40 people daily. The number of their patients is increasing as word spreads of their availability.

These two young physicians already feel integrated into a team of health professionals whose mission is to improve the quality of life in the inner city. The day ends for them at 5 p.m. Meringola, a bachelor, returns to his apartment in Manhattan, and DeAngelis, who is married and has two children, goes home to the Bronx.

### **Jackman, Maine**

The day may end differently for Dr. Joseph Viglotti and his wife, Monique, a registered nurse, both NHSC assignees in Jackman, Maine.

Jackman, a remote community snuggled down amid mountains and wooded lakes, becomes isolated when the gentle breezes of summer give way to the winds of winter. The community, alienated by ice and heavy snow, is frequently snowbound.

The 14-bed fully equipped Marie Joseph Hospital, which provides care to the 3,000 inhabitants and the seasonal tourists who triple the popula-

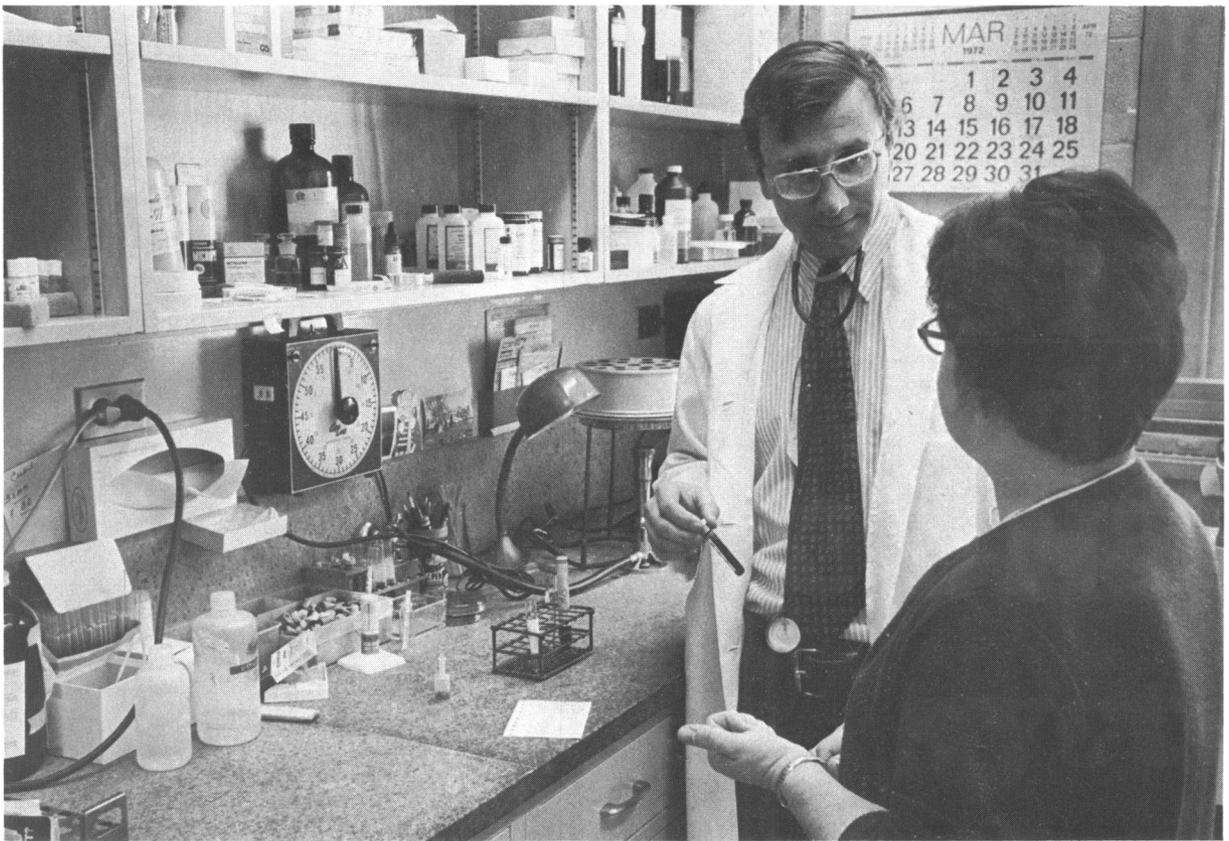
tion, has been forced to close twice because there was no physician. The closest medical facility is 95 miles "downriver" in Waterville.

Fourteen physicians have practiced in Jackman during the past 7 years, and when the last one left, the town applied to the National Health Service Corps for assistance.

Joseph Viglotti, on duty at the Public Health Service Hospital in Boston, was transferred to Jackman—nearly 4 months before the Corps was officially launched. His wife, Monique, had just registered at Boston College to work on her master's degree in nursing.

Viglotti, an urbane young man of 28 with Dartmouth and Harvard Medical Schools and an undergraduate degree from Johns Hopkins University behind him, has settled comfortably into the demands of being a country "doc." His Swiss-born wife, a tall blonde with eyes the color of her native gentians, assists him as his nurse and translator.

As the vanguard of the Corps, the young couple has broken new ground in the Federal Government's delivery of health services.



*The fully equipped, modern laboratory in Jackman's Marie Joseph Hospital takes care of the needs of the community served by the hospital*

As the only physician within a 50-mile radius, Viglotti's old Triumph auto has become a mobile landmark.

Unlike his urban colleagues, he is on call 24 hours a day, and house calls are a standard part of his practice. Usually accompanied by Monique, he makes his rounds, answering emergencies, delivering babies, and tending his chronically ill patients.

His practice is sometimes where he finds it. Spotting him at the post office or in the checkout line of the local grocery store, residents will discuss an ailment with him or ask how they made out on a test. Juggling sacks of groceries, he will sometimes conduct an on-the-spot examination, although he will usually persuade the patient to make an appointment.

Viglotti's concept of total care for the community is all-inclusive, and he has provided emergency veterinary services on occasion. The closest vet is nearly 100 miles away.

A man of great empathy, the medical needs of the community are an eminent factor in Joe Viglotti's life. An arrangement with a young phy-

sician across the border in Canada permits Viglotti and his wife important weekends away and time off to attend professional meetings, but their plans never omit the needs of the patients. An expected delivery, for example, will keep them at home. (The NHSC, aware of the demands on its assignees, intends to provide personnel backup and continuing education for them.)

Minor surgery is performed regularly by Viglotti in the Marie Joseph Hospital. But because there is no anesthetist, patients are sent to Waterville for major surgery. They are returned to Jackman by ambulance to recuperate as soon as they can make the trip. An ambulance service, manned by volunteers, takes emergency patients to Waterville. An air taxi is also available.

The Viglotti's see approximately 20 patients a day. The physician enjoys their complete confidence and the chief problem, he says, is that "they think I'm an expert in everything." He is the first to acknowledge that there is much he doesn't know, and he consults specialists on unusual problems. He is adding to his knowledge every day, he says. Arrangements are made for



*Relaxing in their apartment, the Viglotti's are technically still on duty. As a country doctor, he is on call 24 hours a day.*

his patients to see specialists in Waterville, where two fully staffed modern hospitals are located. An obstetrician makes regular visits to Jackman to check over his maternity patients.

As physician's assistant, Monique Viglotti acts as nurse, bookkeeper, receptionist, and translator. More than half the population is French speaking, and her linguistic abilities are important in communicating with patients.

The National Health Service Corps Clinic is located in the Jackman Town Building, which also houses the office of the town manager, a once-a-week dentist, the State nurse, and a lawyer. An office visit cost \$6 and a house call \$8, the standard fee for the locality. Each of the communities served by the National Health Service Corps adopts a local fee scale in compliance with part B of title XVIII of the Social Security Act.

### **A Labor of Love**

The Viglotti's, DeAngelis, and Meringola make up part of the "profile" of Corps assignees on the

job in urban and rural settings. Each of the communities served has differing, individual needs which are being met by this adaptable cadre of dedicated health professionals.

Corps "commander," Dr. H. McDonald Rimple, 50-year-old career Public Health Service officer, views the program as one of the great humanitarian challenges of the '70's and says "the National Health Service Corps is the catalyst for changing this country's health patterns.

"Through our efforts," says Rimple, "we hope to establish models for others in medicine to follow so that the thousands and thousands of Americans who are now without any kind of medical care will receive the health services they need."

In a letter he writes to each new assignee, he warns, "this will be no bed of roses, but will take hard work, imagination, resourcefulness, and, if you will, a labor of love."

The labor of love keeps Rimple and his staff moving at a breakneck clip in their mission to activate the legislation which created the National Health Service Corps.